



News Release

For Immediate Release

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Pregnancy RiskLine Celebrates 20 Years of Advice

(Salt Lake City, UT) – Mothers Day, 2004 marks the 20th Anniversary since the Pregnancy RiskLine began serving Utah health care providers and the general public. The Pregnancy RiskLine is now one of the oldest and most successful teratology (reproductive hazards) education and research centers in North America.

The RiskLine began in response to a growing number of questions directed to the University of Utah School of Medicine's Division of Medical Genetics and various Utah Department of Health (UDOH) programs. Pregnant women, their health care providers, and their families and friends were anxious to find the most accurate and up-to-date information about the possible effects of medicines/drugs, chemicals and maternal illnesses and other medical conditions on the unborn baby.

“This information was often very difficult to find and, once found, confusing and conflicting,” says Dr. John C. Carey U of U Professor of Pediatrics and founder of the RiskLine. “The RiskLine was established to address these questions in a convenient, accurate, current and easily understood manner, by telephone, at no cost to the caller.”

In 1984, RiskLine counselors handled fewer than 500 inquiries compared to almost 9,000 caller questions in 2003. In 1988, the RiskLine expanded its service to address side effects in infants whose mothers take medications while breastfeeding. Additionally, the RiskLine has expanded outreach efforts, providing continuing education to more than 12,000 individuals and health care professionals in Utah.

When Dr. Gary McFadden recently diagnosed a patient with an infection he also learned she “might” be pregnant. Before prescribing medicine, Dr. McFadden called the Pregnancy RiskLine to make sure the medicine was safe to take during pregnancy.

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Shannon Jimenez called the RiskLine to ask about using antihistamines like Claritin® or Benadryl® because she was breastfeeding and suffering from allergies. Counselors told her that antihistamines may reduce her prolactin levels, resulting in a short-term dip in milk supply, and that could lead to a hungry and angry baby for a day or two. She was told that other choices for allergy relief were available and to talk with her doctor about using prescription nasal sprays like Nasonex® or Flonase®. She was glad she called. “If I would have taken this medicine and not had enough milk, it would have been a disaster because my baby won’t take a bottle, and has never had formula. What would I have done to feed her? At the same time, I’m miserable with these allergies,” said Jimenez.

“Each caller’s question is unique and has to be answered based on each caller’s time of exposure, the dose used and the frequency of the exposure,” says Lynn Martinez, Pregnancy RiskLine Manager, UDOH. For this reason, the program has not created a “list” of medications, chemicals or maternal diseases that cause problems in pregnancy or while breastfeeding. However, the RiskLine is frequently asked certain questions. Here are the “top ten” topics:

1. Over-the-Counter (OTC) cough and cold medications
2. OTC allergy medicines
3. Antidepressants
4. OTC pain medicines
5. Antibiotics
6. Hair care and cosmetic products
7. Household cleaning products
8. Infections and chronic health conditions of mothers
9. Herbs
10. Substances of abuse

The confidential service is available Monday – Friday from 8:30 a.m. to 4:30 p.m. On Saturdays and Sundays, counselors return messages between 6:00 p.m. and 7:00 p.m. For more information, call the RiskLine at 1-800-822-2229 or in Salt Lake Area 328-2229.

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